

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET 7-28-05							SERIAL NO. 01694358 FILING DATE APPLICANT(S)
CLAIMS							
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		
	IND	DEP	IND	DEP	IND	DEP	
1	1		1		1		
2		1		1		1	
3	1		1		1		
4		1		1		1	
5		1		1		1	
6		5		2		1	
7	1		1		1		
8	1		1		1		
9		2		2		2	
10		2		2		2	
11		2		2		2	
12		2		2		2	
13	1		1		1		
14		1		1		1	
15	1		1		1		
16		1		1		1	
17		1		1		1	
18		1		1		1	
19		6		6		6	
20		6		6		6	
21		6		6		6	
22		6		6		6	
23							
24							
25							
26							
27							
28							
29							
30							
31							
32							
33							
34							
35							
36							
37							
38							
39							
40							
41							
42							
43							
44							
45							
46							
47							
48							
49							
50							
51							
52							
53							
54							
55							
56							
57							
58							
59							
60							
61							
62							
63							
64							
65							
66							
67							
68							
69							
70							
71							
72							
73							
74							
75							
76							
77							
78							
79							
80							
81							
82							
83							
84							
85							
86							
87							
88							
89							
90							
91							
92							
93							
94							
95							
96							
97							
98							
99							
100							
TOTAL IND.	6		6		6		
TOTAL DEP.	40		41		39		
TOTAL CLAIMS	50		47		45		
TOTAL IND.							
TOTAL DEP.							
TOTAL CLAIMS							